

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date:: November 26, 2003

Application Type:: Utility

Subject Matter::

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of Copies of CRF::

Title:: SYSTEM AND METHOD FOR NON-DESTRUCTIVE IMPLANTATION CHARACTERIZATION OF QUIESCENT MATERIAL

Attorney Docket Number:: 033915-002

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: Yes

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

First Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Raymond
Middle Name::
Family Name:: Kuzbyt
Name Suffix::
City of Residence:: Boulder Creek
State or Province of Residence:: California
Country of Residence:: USA
Street of Mailing Address:: 7 Fernwood Drive
City of Mailing Address:: Boulder Creek
State or Province of Mailing Address:: California
Country of Mailing Address:: USA
Postal or Zip Code of Mailing
Address:: 95006
Second Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Ronald
Middle Name:: J.
Family Name:: Eddy
Name Suffix::
City of Residence:: Wickenburg
State or Province of Residence:: Arizona
Country of Residence:: USA
Street of Mailing Address:: 1130 Palo Verde Drive
City of Mailing Address:: Wickenburg

State or Province of Mailing Address:: Arizona
Country of Mailing Address:: USA
Postal or Zip Code of Mailing
Address:: 85358
Third Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: Marylou
Middle Name::
Family Name:: Meloni
Name Suffix::
City of Residence:: South Hamilton
State or Province of Residence:: Massachusetts
Country of Residence:: USA
Street of Mailing Address:: 81 Sagamore Street
City of Mailing Address:: South Hamilton
State or Province of Mailing Address:: Massachusetts
Country of Mailing Address:: USA
Postal or Zip Code of Mailing
Address:: 01982

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number:: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing

Address::